Under the Paperwork Reduction	Act of 1005 no nom	nanc are required to more					NT OF COMMERCE
Olider the Paper work Reduction /	ACI OF 1995, NO pen			cket Number	1000-011		JMB COILLOI HUMBER.
DECLARATION DES	TY OR	First Named Inventor			rd W. Knowlton		
	\ \	COMPLETE IF KNOWN					
PATENT A		איי		0011			
(37 CF	R 1.63)		Application Number		NA		
Declaration Submitted OR	Declaration Submitted	tion	Filing Date		04/21/2004	ţ	
With Initial Filing	Filing (s	surcharge	Art Unit		NA		
riing	require		Examiner N	lame	NA		
I hereby declare that: Each inventor's residence, ma I believe the inventor(s) name	d below to be t	he original and first				nich is claim	ned and for
which a patent is sought on th	e invention ent	itled:					
METHOD FOR TREA	TMENT OF	TISSUE					
		- Committee Contract					
the enceification of which		(Title of the	Invention)				
the specification of which							
is attached hereto							
OR							
was filed on (MM/DD/Y	YYY)		as Unit	ted States App	plication Nu	ımber or P(CT International
Application Number		and was amended	on (MM/E	DD/YYYY) [(if applicable).
I hereby state that I have revie	wed and under	rstand the contents	of the abov	L e belitied e	necification	including	
amended by any amendment			or the abo	ve identilied s	pecification	i, including	uie Ciairiis, as
I acknowledge the duty to di- continuation-in-part application and the national or PCT intern	ns, material inf	ormation which bec	ame avail	able between			
I hereby claim foreign priority	benefits unde	r 35 U.S.C. 119(a)	-(d) or (f),	or 365(b) of	any foreig	n application	on(s) for patent,
inventor's or plant breeder's ri	ights certificate	(s), or 365(a) of an	y PCT inte	emational app	lication whi	ich designa	ited at least one
country other than the United application for patent, inventor							
before that of the application of	on which priority	/ is claimed.	1.6(3 <i>)</i> , UI d	ing i Oi iiileii	ιαιιστιαι αμμ	moaudii ila	ring a ming date
Prior Foreign Application	Country	Foreign Filing		Prior			Copy Attached?
Number(s)	Country	(MM/DD/YYY	111	Not Cla	iinea 7	Yes	No No
				L]		
]		
					า์ เ		
		1			i		ii I

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/S8/01 (08-05)

Approved for use through 07/31/2003. OSB 0551-0032

U.S. Parent and Trademark Office; U.S. DEPARTMENT OF CONNERCE

U.S. Parent and Trademark Office; U.S. DEPARTMENT OF CONNERCE

Under the Peperwork Reduction Act of 1995, no persone are required to respond to a collection of information unless if contains a yield DMB control purpose.

DECLARATION — Utility or Design Patent Application

					1			
trect elli correspondence to:	Customer	Number:			or [Corresp	ondence address below	
ame			•					
el M. Herris	•	•						
ddress 27 Solana Driva								
City				State			ZIP	
ountain View			İ	CA	•		94010	
ountry		Telephone			Fax			
650-941-9421				650-841-8421				
hereby declare that all statement and belief are believed to be statements and the like so made also estatements may jeopardize	TUE, SOND HAI	ale hu fine o	r imprisc	nment, or	both, under	18 U.S.C.	wiedge that willful fai 1001 and that such will	
NAME OF SOLE OR FIRST INV	ENTOR:		Ap	ettion has	been filed for	this unsig	ned inventor	
Given Name (first and middle [if any])	WA	es/	We	LLS	Femily Nam or Surname		WLTOU	
Enventor's Skignature	arel	UN		the	nell	bors	Date / 20	
Recidence: City CRADAV 12 OM	e N	exag	IA	Country	10	Cide	US	
Medica Address	104	23					Louis O	
Zonhun Com	State N	EVIAC	(1)	ZI	894	48	Couply	
NAME OF SECOND INVENTO	R:						for this unsigned inver	
Given Name (first and middle [if any])					Family Nam or Sumame			
Inventor,e							Deta	
Signature						1 624		
Residence: City	State			Country		Chiz	enship	
Mailing Address	<u>L</u>							
City	State			Z	Р	Cou	intry	
				1				
1								